CSR:	
Amount:	



# ALTERNATING PROPRIETORSHIP APPLICATION SERIES 20

DLLC USE ONLY
Job #:
Date Accepted:
CSR:

Arizona Dept. of Liquor Licenses and Control 800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007 (602) 542-5141

# Type or Print with <u>Black</u> Ink

### APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE

#### **SECTION 1:** Ownership

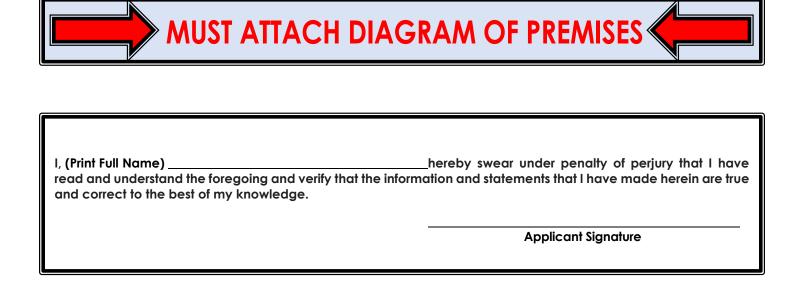
1. Arizona Liqu	or License #:		TTB Permit Number:				
1. Agent/Sole	Proprietor Name		First		Middle		
	e (LLC/Corp):				Middle		
3. Premises No	ame (Doing Business As-DBA	):					
4. Premises Ac	ddress:	Street	City	State	Zip Code	County	
5. Mailina Ado	•		City	State	Zip Code		
6 Business Pho	ne:		Cell Number	:			
7. Email Addre	ess:						
SECTION 2:	All questions must be answ	vered					
□ Yes □ No	1. I verify that the attache footage, liquor storage a	_			all exits, entra	nces, square	
☐ Yes ☐ No	2. I understand that I mus	st file all reports	that relate to its v	wine productior	and manufac	cturing	
☐ Yes ☐ No	3. I understand that the of Arizona and that the	•	•				
	☐ Yes ☐ No - owner/age	4 (Arizona liquor la	or law) training Certificate of Completion				
	☐ Yes ☐ No - owner/age (Only require		t card and fee of since fingerprints wer		202(A)]		
□ Yes □ No	I have read and am for operation of an alternation of an alternation.				ilities as they re	elate to the	
□ Yes □ No		I understand that the renewal application and fees for this license will be due at the same time as the license identified in Section 1, question # 7.a.					
□ Yes □ No	6. I understand annual refrom liquor produced ( [Farm winery: A.R.S.§4-205.	at a location of					

#### **SECTION 3:** Licenses

1.	Federal ATF Permit #:
2.	Host Winery License #:
3.	Other Tenants Alternating Proprietorship License #'s:

## **SECTION 4:** Diagram of Premises

In this diagram, please show only the area where liquor will be sold, served, consumed, dispensed, possessed and/or stored. It must show all entrances, exits, interior walls, bar areas and bar stools, hi-tops, dining tables and chairs, kitchen, dance floor, stage, game rooms, restrooms, etc. Do not include parking lots, living quarters. If a legible copy of a rendering or drawing of your premises is attached to this application, please write the words "diagram attached" in the box provided below.



	For Depo	artment of Liquor Use Onl	l <u>v</u>
CSR Name:	ne: Date Payment Received:		
	☐ Application Fee	☐ Fingerprint Fee	☐ Issuance Fee
Investigating Officer:		Date of Inspection:	
Investigation	☐ Approval ☐ Disapproval	Dire	ector's signature, disapproval only
Pending appl	ication review by:		Date:
☐ Issue	e license 🔲 Do not issu	Je license 🗖 Forward to	Board for hearing

Farm Winery: A.R.S. §4-205.04(D)